

# TRICARE Pharmacy Program Medical Necessity Form for ACE Inhibitor / CCB Combination Products (Lexxel & Tarka)

This form applies to the TRICARE Mail Order Pharmacy (TMOP) and the TRICARE Retail Pharmacy Program (TRRx) and may be found on the TRICARE Pharmacy website at [www.tricare.osd.mil/pharmacy/medical-nonformulary.cfm](http://www.tricare.osd.mil/pharmacy/medical-nonformulary.cfm). The medical necessity criteria outlined on this form also apply at Military Treatment Facilities (MTFs). The form must be completed and signed by the prescriber.

- The ACE inhibitor/calcium channel blocker (CCB) combination product on the DoD Uniform Formulary is Lotrel (benazepril/amlodipine). **Lexxel (enalapril/felodipine) and Tarka (trandolapril/verapamil) are non-formulary, but available to most beneficiaries at a \$22 cost share.**
- **The individual components of Lexxel and Tarka are on the DoD Uniform Formulary.** Prescribing the component medications individually would result in a total cost share of \$6 for the Lexxel equivalent (generic enalapril and felodipine) and \$12 for the Tarka equivalent (brand name Mavik and generic verapamil). Other formulary ACE inhibitors include: benazepril, captopril, fosinopril, and lisinopril. Other formulary CCBs include: nifedipine extended release, nisoldipine (Sular), diltiazem, and verapamil.
- You do **NOT** need to complete this form in order for non-active duty beneficiaries (spouses, dependents, and retirees) to obtain non-formulary medications at the \$22 non-formulary cost share. The purpose of this form is to provide information that will be used to determine if the use of a non-formulary medication *instead of a formulary medication* is medically necessary. If a non-formulary medication is determined to be medically necessary, non-active duty beneficiaries may obtain it at the \$9 formulary cost share.
- Active duty service members may not fill prescriptions for a non-formulary medication unless it is determined to be medically necessary. There is no cost share for active duty service members at any DoD pharmacy point of service.

<b>MAIL ORDER</b>	<p><b>If the prescription is to be filled through the TRICARE Mail Order Pharmacy, check here</b> <input type="checkbox"/></p> <ul style="list-style-type: none"> <li>The completed form and the prescription may be <b>faxed</b> to <b>1-877-283-8075</b> or <b>1-602-586-3915 OR</b></li> <li>The patient may attach the completed form to the prescription and <b>mail</b> it to: <b>Express Scripts, P.O. Box 52150, Phoenix, AZ 85072-9954</b></li> </ul>	<b>RETAIL</b>	<p><b>If the prescription is to be filled at a retail network pharmacy, check here</b> <input type="checkbox"/></p> <ul style="list-style-type: none"> <li>The provider may <b>call:</b> <b>1-866-684-4488</b> <b>OR</b></li> <li>The completed form may be <b>faxed</b> to <b>1-866-684-4477</b></li> </ul>	<b>MTF</b>	<ul style="list-style-type: none"> <li>Non-formulary medications are available at MTFs only if both of the following are true: <ul style="list-style-type: none"> <li>The prescription is written by a military provider or, at the discretion of the MTF, a civilian provider to whom the patient was referred by the MTF.</li> <li>The non-formulary medication is determined to be medically necessary.</li> </ul> </li> <li>Please contact your local MTF for more information. There are no cost shares at MTFs.</li> </ul>
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There is no expiration date for approved medical necessity determinations.

## Step 1 Please complete patient and physician information (Please Print)

Patient Name: _____	Physician Name: _____
Address: _____	Address: _____
Sponsor ID #: _____	Phone #: _____
	Secure Fax #: _____

## Step 2 Please explain why the patient cannot be treated with the separate components of Lexxel or Tarka (which are on the DoD Uniform Formulary) or with the formulary ACE inhibitor/CCB combination product Lotrel (benazepril/amlodipine).

1. Use of the separate components of Lexxel (enalapril/felodipine) or Tarka (trandolapril/verapamil) is contraindicated (e.g., hypersensitivity to dyes or other inert ingredients), Lexxel or Tarka are not contraindicated, AND use of the formulary product Lotrel (benazepril/amlodipine) is contraindicated or not clinically appropriate. Please explain below: ☐
  
2. The patient is stabilized on Lexxel or Tarka, is clinically fragile (multiple comorbidities) and changing to the separate components or to the formulary product Lotrel would incur an unacceptable risk of destabilization. Please explain below: ☐

## Step 3 I certify the above is correct and accurate to the best of my knowledge. Please sign and date:

**3**

\_\_\_\_\_  
Prescriber Signature

\_\_\_\_\_  
Date